

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A SUBMISSION UNDER 35 U.S.C. 371		ATTORNEY'S DOCKET NUMBER US030193
INTERNATIONAL APPLICATION NO. PCT/IB2003/050950	INTERNATIONAL FILING DATE June 21, 2004	U.S. APPLICATION NO. (If known, see 37 CFR 1.5) 10/562284
TITLE OF INVENTION CONTROL METHOD AND APPARATUS FOR IMPROVING THE EFFICACY OF FLUORESCENT LAMPS		
APPLICANT(S) FOR DO/EO/US Charles TRUSHELL		
Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:		
<p>1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a submission under 35 U.S.C. 371.</p> <p>2. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a submission under 35 U.S.C. 371.</p> <p>3. <input type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (21) indicated below.</p> <p>4. <input type="checkbox"/> The US has been elected (Article 31).</p> <p>5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371(c)(2)) <ul style="list-style-type: none"> a. <input type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau). b. <input checked="" type="checkbox"/> has been communicated by the International Bureau. c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US). </p> <p>6. <input type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371(c)(2)) <ul style="list-style-type: none"> a. <input type="checkbox"/> is attached hereto. b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4). </p> <p>7. <input checked="" type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3)) <ul style="list-style-type: none"> a. <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau). b. <input type="checkbox"/> have been communicated by the International Bureau. c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired. d. <input checked="" type="checkbox"/> have not been made and will not be made. </p> <p>8. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)).</p> <p>9. <input checked="" type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)).</p> <p>10. <input type="checkbox"/> An English language translation of the annexes of the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)).</p>		
<p>Items 11 to 20 below concern document(s) or information included:</p> <p>11. <input checked="" type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98.</p> <p>12. <input checked="" type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.</p> <p>13. <input type="checkbox"/> A preliminary amendment.</p> <p>14. <input type="checkbox"/> An Application Data Sheet under 37 CFR 1.76.</p> <p>15. <input type="checkbox"/> A substitute specification.</p> <p>16. <input type="checkbox"/> A power of attorney and/or change of address letter.</p> <p>17. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821- 1.825.</p> <p>18. <input type="checkbox"/> A second copy of the published International Application under 35 U.S.C. 154(d)(4).</p> <p>19. <input type="checkbox"/> A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4).</p> <p>20. <input checked="" type="checkbox"/> Other items or information: Express Mail Certificate; PTO/SB/80; PTO/SB/96; PTO/SB/08A; PTO/SB/08B; Charge Authorization; Receipt Confirmation Postcard</p>		

This collection of information is required by 37 CFR 1.414 and 1.491-1.492. The information is required to obtain or retain a benefit by the public, which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 15 minutes to complete, including gathering information, preparing, and submitting the completed form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop PCT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

U.S. APPLICATION NO. (if known, see 37 CFR 1.5) 101562284		INTERNATIONAL APPLICATION NO. PCT/IB2003/050950	ATTORNEY'S DOCKET NUMBER US030193	
The following fees have been submitted			CALCULATIONS	PTO USE ONLY
21. <input checked="" type="checkbox"/> Basic national fee..... \$300			\$ 300.00	
22. <input checked="" type="checkbox"/> Examination fee If International preliminary examination report prepared by USPTO and all claims satisfy provisions of PCT Article 33(1)-(4)..... \$100 All other situations..... \$200			\$ 200.00	
23. <input checked="" type="checkbox"/> Search fee Search fee (37 CFR 1.445(a)(2)) has been paid on the international application to the USPTO as an International Searching Authority..... \$100 International Search Report prepared and provided to the Office..... \$400 All other situations..... \$500			\$ 400.00	
TOTAL OF 21, 22 and 23 =			\$ 900.00	
<input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.				
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof (round up to a whole number)	RATE	
- 100 =	/50 =		x \$250	\$
Surcharge of \$130.00 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492(h)).			\$	
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE	\$
Total claims	9	- 20 =	x \$ 50	\$ 0.00
Independent claims	2	- 3 =	x \$200	\$ 0.00
MULTIPLE DEPENDENT CLAIM(S) (if applicable)			+ \$360	\$
			TOTAL OF ABOVE CALCULATIONS =	\$ 0.00
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Fees above are reduced by ½.				
			SUBTOTAL =	\$ 900.00
Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492(i)).			\$	
			TOTAL NATIONAL FEE =	\$ 900.00
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property			\$ 40.00	
			TOTAL FEES ENCLOSED =	\$ 940.00
			Amount to be refunded:	\$
			Amount to be charged:	\$ 940.00
a. <input type="checkbox"/>	A check in the amount of \$ _____ to cover the above fees is enclosed.			
b. <input checked="" type="checkbox"/>	Please charge my Deposit Account No. <u>14-1270</u> in the amount of \$ <u>940.00</u> to cover the above fees. A duplicate copy of this sheet is enclosed.			
c. <input checked="" type="checkbox"/>	The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>14-1270</u> . A duplicate copy of this sheet is enclosed.			
d. <input type="checkbox"/>	Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the International Application to pending status.				
SEND ALL CORRESPONDENCE TO: Corporate Patent Counsel Philips Electronics North America Corporation P.O. Box 3001 Briarcliff Manor, NY 10510				
 SIGNATURE Frank Keegan NAME 50,145 REGISTRATION NUMBER				

IAP4 Rec'd PCT/TTO 22 DEC 2005
107562284

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

Atty. Docket

CHARLES TRUSHELL, ET.AL.

US030193

Serial No.

Group Art Unit

Filed: CONCURRENTLY

Ex.

Title: CONTROL METHOD AND APPARATUS FOR IMPROVING THE EFFICACY OF FLUORESCENT LAMPS

CERTIFICATE OF EXPRESS MAILING

[X] Express Mail Mailing Label No.

EV 746 348 958 45

Date of Deposit: 12/22/2005

I hereby certify that this paper and/or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. 1.10 on the date indicated above and is addressed to the Commissioner for Patents, PO Box, 1450, Alexandria, VA 22313-1450

BURNETT JAMES

Typed Name

Burnett James

Signature

SS

ICE®

www.usps.com

AFFIX POSTAGE OR
CORPORATE ACCOUNT
LABEL HERE.

101562284

Please Rush To Addressee

1290 U.S. POSTAGE PB 2212553
0325 \$37.50 DEC 22 05
9716 MAILED FROM ZIP CODE 10510

Misuse may be a violation of federal law.

FOR PICKUP OR TRACKING CALL 1-800-222-8111



EV746348958US

(POSTAL SERVICE USE ONLY)			
ited y Year	Day of Delivery	Postage	
	<input type="checkbox"/> Next <input type="checkbox"/> 2nd <input type="checkbox"/> 2nd Del. Day	\$	
Scheduled Date of Delivery	Return Receipt Fee		
Month Day	\$		
Scheduled Time of Delivery	COD Fee	Insurance Fee	
<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> Noon <input type="checkbox"/> 3 PM	\$	\$
Total Weight	Military		
<input type="checkbox"/> ozs.	<input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Total Postage & Fees	
Int'l Alpha Country Code Acceptance Emp. Initials			

DELIVERY (POSTAL USE ONLY)			
Delivery Attempt	Time	<input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Mo. Day			
Delivery Attempt	Time	<input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Mo. Day			
Delivery Date	Time	<input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Mo. Day			
<input type="checkbox"/> WAIVER OF SIGNATURE (Domestic Mail Only) Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent if delivery employee judges that article can be left in secure location and I authorize that delivery employee's signature constitutes valid proof of delivery.			
<input type="checkbox"/> NO DELIVERY <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday <input type="checkbox"/> Customer Signature			

(PLEASE PRINT)

PHONE ()

TO: (PLEASE PRINT)

PHONE ()

USPS MAIL CENTER
DEC 22 2005

EXPRESS MAIL LABEL DATE IN

bove

BEST AVAILABLE COPY

CKUP OR TRACKING: Visit www.usps.com or Call 1-800-222-1811



4. DROP OFF/ICK UP

Call www.usps.com (no matter how many pieces) or drop off your Express Mail package at a post office, or an Express Mail box.